

QUARTERLY STATEMENT

AS OF SEPTEMBER 30, 2005 OF THE CONDITION AND AFFAIRS OF THE

John Deere Health Plan, Inc.

NAIC Group Code 02:		0219 (Prior Period)	NAIC Company	Code	95378	Employer's	s ID Number	36-3379945
Organized under the Laws of	Period)	,		State of D	omicile or	Port of Entry	II	linois
G		IIIIIIOIO				T OIL OI LINITY		
Country of Domicile	if A i - i + O	1111-5 1		nited States of		1 O 1 O		
• •	ife, Accident &					Service Corp		i
	/ision Service C						Organization [X]	•
			vice or Indemnity			O, Federally Q	ualified? Yes []	No [X]
	08/05/		Commer	nced Business	· _		07/01/1985	
tatutory Home Office		1300 River		,		Me	oline, IL 61265	
Asia Administrativa Offica	100	(Street and Nu	mber)		Malina II	C100F	own, State and Zip Coo	00 705 1000
Main Administrative Office	(Stre	eet and Number)		(City o	Moline, IL	e and Zip Code)	(Area Co	309-765-1200 de) (Telephone Number)
1ail Address	,	iver Drive		,,			, IL 61265	, (
	(Street and Nu	mber or P.O. Box)		- '		(City or Town,	State and Zip Code)	
rimary Location of Books and	Records	1300 R	iver Drive		Moline	e, IL 61265		09-765-1221
		(Street a	nd Number)			, State and Zip Coo	le) (Area Co	de) (Telephone Number)
nternet Website Address				JohnDeereH	ealth.com			
Statutory Statement Contact			icer				9-765-1221	
Mincer loa	nG@JohnDeere	(Name)				(Area Code) (Tele 309-748-1	ephone Number) (Exter	nsion)
	:-mail Address)					(FAX Numl		
Policyowner Relations Contact	,	1300 River Dri	ve	M	oline, IL 6	`	,	765-1200
,		(Street and Number						hone Number) (Extension)
			OFFIC	ERS				
Name		Title	00		Name			Title
Richard Lowell Bartsh M.D		President	1	James	s Alan Cou	usins		easurer
Victoria Jane Graves	·	Secretary				,		
James Alan Cousins William Kenneth Appelgat Victoria Kauzlarich		harles Phillip F hn Willard Gold	den M.D.	Richard Lo	owell Barts Sue White	eside		ward Hecker Steffens M.D.
			Minos	Charlotte Hers	shberger K	Koenig M.D.		
State ofl County ofRoo			3					
The officers of this reporting entity above, all of the herein described a this statement, together with relate of the condition and affairs of the completed in accordance with the that state rules or regulations requirespectively. Furthermore, the score exact copy (except for formatting dito the enclosed statement.	assets were the abd exhibits, scheduled aid reporting entited AIC Annual State re differences in report of this attestation	solute property of les and explanation by as of the report ment Instructions eporting not relate on by the describ	of the said reporting ons therein containe ting period stated a and Accounting Property and to accounting property and officers also incl	entity, free and ed, annexed or re bove, and of its actices and Proc actices and proc udes the related	clear from a eferred to, is income and cedures mar edures, acc correspond	any liens or claims a full and true so deductions the nual except to the cording to the besiding electronic file.	as thereon, except as statement of all the a refrom for the period e extent that: (1) sta st of their information ing with the NAIC, v	s herein stated, and tha assets and liabilities and I ended, and have beer tte law may differ; or, (2 n, knowledge and belief when required, that is ar
Richard Lowell Bart President	sh M.D.		James Alar Treas			_	Victoria Jane (Secretary	
Subscribed and sworn to be day of	efore me this November, 2	2005			b. If 1.	*	al filing? endment number	Yes [X] No [
Mary Ann Vickers, Executive	Administrative A	ssistant			3.	Number of pa	ges attached	
10/02/2007								

ASSETS

				4	
		1	Current Statement Date 2	3	4
		'	-	Ü	December 31
				Net Admitted Assets	Prior Year Net
		Assets	Nonadmitted Assets	(Cols. 1 - 2)	Admitted Assets
1.	Bonds	188,851,492		188,851,492	190,395,262
2.	Stocks:				
				0	0
	2.1 Preferred stocks				0
	2.2 Common stocks			0	0
3.	Mortgage loans on real estate:				
	3.1 First liens			0	0
	3.2 Other than first liens			0	0
4.	Real estate:				
	4.1 Properties occupied by the company (less				
	\$ encumbrances)			0	0
				-	•
	4.2 Properties held for the production of income				
	(less \$ encumbrances)			0	0
	4.3 Properties held for sale (less				
	·			0	0
	\$ encumbrances)			U	
5.	Cash (\$				
	cash equivalents (\$0)				
	and short-term investments (\$15,230,065)	15 000 DEE		15,230,065	16 164 204
6.	Contract loans, (including \$premium notes)			0	0
7.	Other invested assets	0	0	0	0
	Receivables for securities			250,648	0
		*			
	Aggregate write-ins for invested assets		0	0	0
10.	Subtotals, cash and invested assets (Lines 1 to 9)	204, 332, 205	0	204,332,205	206 , 559 , 553
11.	Title plants less \$				
	only)			0	
10	••				
	Investment income due and accrued	1,020,732		1,020,732	1,007,100
13.	Premiums and considerations:				
	13.1 Uncollected premiums and agents' balances in the course of				
	collection	10 329 744	359 407	9 970 337	2 174 947
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,	, , , , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , , ,
	13.2 Deferred premiums, agents' balances and installments booked but				
	deferred and not yet due (including \$earned				
	but unbilled premiums)			0	0
	13.3 Accrued retrospective premiums			0	0
14.	Reinsurance:				
	14.1 Amounts recoverable from reinsurers			0	177 ,317
	14.2 Funds held by or deposited with reinsured companies			0	0
	14.3 Other amounts receivable under reinsurance contracts				0
	Amounts receivable relating to uninsured plans				3,782,432
	Current federal and foreign income tax recoverable and interest thereon			0	0
16.2	Net deferred tax asset	1,635,870	1,635,870	0	0
	Guaranty funds receivable or on deposit			0	0
	Electronic data processing equipment and software			D	υ
19.	Furniture and equipment, including health care delivery assets				
	(\$)			0	0
20	Net adjustment in assets and liabilities due to foreign exchange rates				0
					^
	Receivables from parent, subsidiaries and affiliates		151,129	0	
22.	Health care (\$1,841,158) and other amounts receivable	1,841,158	347,086	1,494,073	3,720,131
23.	Aggregate write-ins for other than invested assets	0	0	0	0
	Total assets excluding Separate Accounts, Segregated Accounts and				
		221,341,340	2,493,491	218,847,849	218,281,560
	Protected Cell Accounts (Lines 10 to 23)	221,341,340	۷,485,481	210,041,049	210,201,000
25.	From Separate Accounts, Segregated Accounts and Protected				
	Cell Accounts			0	0
26.	Total (Lines 24 and 25)	221,341,340	2,493,491	218,847,849	218,281,560
	DETAILS OF WRITE-INS	, ,	,,	-,,,,-10	-,,
0901.					
0902.					
0903.					<u></u>
		^	^	^	۸
	Summary of remaining write-ins for Line 9 from overflow page				
0999.	Totals (Lines 0901 thru 0903 plus 0998)(Line 9 above)	0	0	0	0
2301.	Other Accounts Receivable			0	0
			• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •
2303.					
2398.	Summary of remaining write-ins for Line 23 from overflow page	0	0	0	0
2399.	Totals (Lines 2301 thru 2303 plus 2398)(Line 23 above)	0	0	0	0
	, F		·	·	· · · · · · · · · · · · · · · · · · ·

${\bf STATEMENT\ AS\ OF\ SEPTEMBER\ 30,\ 2005\ OF\ THE\ John\ Deere\ Health\ Plan,\ Inc.}$

LIABILITIES, CAPITAL AND SURPLUS

	LIADILITIES, OAI		Current Period		Prior Year
		1 Covered	2 Uncovered	3 Total	4 Total
	0	i		101,978,978	
1.	Claims unpaid (less \$				
2.	Accrued medical incentive pool and bonus amounts				337 , 725
3.	Unpaid claims adjustment expenses				0
4.	Aggregate health policy reserves				0
5.	Aggregate life policy reserves				0
6.	Property/casualty unearned premium reserve				0
7.	Aggregate health claim reserves				
8.	Premiums received in advance				
9.	General expenses due or accrued	1 , 164 , 844		1 , 164 , 844	4,413,702
10.1	Current federal and foreign income tax payable and interest thereon (including				
	\$				
	Net deferred tax liability				
11.	Ceded reinsurance premiums payable			0	0
12.	Amounts withheld or retained for the account of others			0	0
13.	Remittances and items not allocated			0	0
14.	Borrowed money (including \$ current) and				
	interest thereon \$ (including				
	\$current)			0	0
15.	Amounts due to parent, subsidiaries and affiliates				14,996,923
	Payable for securities				0
	Funds held under reinsurance treaties with (\$				
	authorized reinsurers and \$unauthorized				
	reinsurers)			0	0
18.	Reinsurance in unauthorized companies				0
19.	Net adjustments in assets and liabilities due to foreign exchange rates				
20.	Liability for amounts held under uninsured accident and health plans				0
	Aggregate write-ins for other liabilities (including \$				
۷۱.	current)	095 776	0	095 776	683 080
22.	Total liabilities (Lines 1 to 21)				
	Aggregate write-ins for special surplus funds				
23.					
	Common capital stock				
25.	Preferred capital stock				
26.	Gross paid in and contributed surplus				
27.	Surplus notes				
28.	Aggregate write-ins for other than special surplus funds				
29.	Unassigned funds (surplus)	XXX	XXX	69 , 583 , 304	55,913,380
30.					
	30.1shares common (value included in Line 24)				
	\$)	XXX	XXX		0
	30.2 shares preferred (value included in Line 25)				
	\$)				
31.	Total capital and surplus (Lines 23 to 29 minus Line 30)	XXX	XXX	109 , 134 , 304	95,464,380
32.	Total liabilities, capital and surplus (Lines 22 and 31)	XXX	XXX	218,847,849	218,281,560
	DETAILS OF WRITE-INS				
2101.	Payables From Cost Contracts	315,904		315,904	(17, 187)
2102.	Payable to CMS			0	135,066
2103.	State Income Taxes Payable	498,333		498,333	88,711
2198.	Summary of remaining write-ins for Line 21 from overflow page	171,539	0	171,539	477 , 390
2199.	Totals (Lines 2101 thru 2103 plus 2198) (Line 21 above)	985,776	0	985,776	683,980
2301.		xxx	xxx		
2303.					
	Summary of remaining write-ins for Line 23 from overflow page				0
2399.	Totals (Lines 2301 thru 2303 plus 2398) (Line 23 above)	2004		0	0
	Reserve and Restricted Funds			-	1,500,000
2802.	NOSOTYO WITH NOSTT TOTOU TUINOS				
2803.					
2898.	Summary of remaining write-ins for Line 28 from overflow page				
				1,500,000	
∠ఠყყ.	Totals (Lines 2801 thru 2803 plus 2898) (Line 28 above)	XXX	XXX	1,000,000	1,500,000

STATEMENT OF REVENUE AND EXPENSES

	STATEMENT OF REVENUE AN	Current Year		Prior Year To Date
		1 Uncovered	2 Total	3 Total
1. 1	Member Months.	XXX		2,095,800
	Net premium income (including			
	Change in unearned premium reserves and reserve for rate credits			
	Fee-for-service (net of \$medical expenses)			
	Risk revenue			
	Aggregate write-ins for other health care related revenues			
	Aggregate write-ins for other non-health revenues			
	Total revenues (Lines 2 to 7)			
	,			
ı	Hospital and Medical:			
9. I	Hospital/medical benefits	25,391,790	347,408,327	419,291,357
10. (Other professional services	1,507,255	10,452,645	11,042,414
11. (Outside referrals			0
12.	Emergency room and out-of-area	417 ,210	9,662,440	12,639,618
13. F	Prescription drugs		53,049,845	60,671,430
14.	Aggregate write-ins for other hospital and medical	0	0	0
15. I	Incentive pool, withhold adjustments and bonus amounts		(155,075)	(10,032,412)
16. \$	Subtotal (Lines 9 to 15)	27,316,256	420 , 418 , 182	493,612,406
ı	Less:			
17. 1	Net reinsurance recoveries		6,109	112,639
18.	Total hospital and medical (Lines 16 minus 17)	27 , 316 , 256	420,412,073	493,499,767
19. 1	Non-health claims (net)			0
20. (Claims adjustment expenses, including \$ 2,334,252cost containment expenses		11,354,737	10,677,733
21. (General administrative expenses		52,368,852	46 , 761 , 887
22. I	Increase in reserves for life and accident and health contracts including			
9	increase in reserves for life only)			0
23.	Total underwriting deductions (Lines 18 through 22)	27 , 316 , 256	484 , 135 , 662	550,939,387
24. 1	Net underwriting gain or (loss) (Lines 8 minus 23)	XXX	10,993,607	(5,434,005)
25. 1	Net investment income earned		6,739,834	6, 171, 384
26. N	Net realized capital gains (losses) less capital gains tax of \$		173,468	778,799
27. 1	Net investment gains (losses) (Lines 25 plus 26)	0	6,913,303	6,950,183
28. 1	Net gain or (loss) from agents' or premium balances charged off [(amount recovered			
9	\$) (amount charged off \$			0
29. /	Aggregate write-ins for other income or expenses	0	(6,042)	(102,751)
30. 1	Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus		.=	
		XXX		1,413,427
	Federal and foreign income taxes incurred		5,963,648	•
	Net income (loss) (Lines 30 minus 31)	XXX	11,937,220	1,102,976
ı	DETAILS OF WRITE-INS			
0601				
0602.		XXX		
0603				
			0	0
0699.	Totals (Lines 0601 thru 0603 plus 0698) (Line 6 above)	XXX	0	0
0701		XXX		
0702		XXX		
		XXX		
0798.	Summary of remaining write-ins for Line 7 from overflow page	XXX	0	0
0799.	Totals (Lines 0701 thru 0703 plus 0798) (Line 7 above)	XXX	0	0
1402				
1403				
1498.	Summary of remaining write-ins for Line 14 from overflow page	0	0	0
1499.	Totals (Lines 1401 thru 1403 plus 1498) (Line 14 above)	0	0	0
2901. F	Fines and Penalties – Regulatory Authorities		(6,042)	(102,751)
2902				
2903				
2998.	Summary of remaining write-ins for Line 29 from overflow page	0	0	0
2999.	Totals (Lines 2901 thru 2903 plus 2998) (Line 29 above)	0	(6,042)	(102,751)

STATEMENT OF REVENUE AND EXPENSES (Continued)

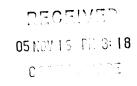
	STATEMENT OF REVENUE AND EXPENSES (Continued)									
		Current Year to Date	Prior Year to Date	Prior Year						
	CAPITAL AND SURPLUS ACCOUNT:									
33.	Capital and surplus prior reporting year	95,464,381	73,529,914	73,529,914						
	GAINS AND LOSSES TO CAPITAL & SURPLUS:									
34.	Net income or (loss) from Line 32	11,937,220	1,102,976	5,625,286						
35.	Change in valuation basis of aggregate policy and claim reserves		0	0						
36.	Change in net unrealized capital gains (losses) less capital gains tax of \$		(8,364)	(8,364)						
37.	Change in net unrealized foreign exchange capital gain or (loss)		0	0						
38.	Change in net deferred income tax		0	0						
39.	Change in nonadmitted assets	2,270,937	(1,354,092)	1,544,381						
40.	Change in unauthorized reinsurance	0	0	0						
41.	Change in treasury stock	-	0	0						
42.	Change in surplus notes	0	0	0						
43.	Cumulative effect of changes in accounting principles		0	0						
44.	Capital Changes:									
	44.1 Paid in		15,000,000	0						
	44.2 Transferred from surplus (Stock Dividend)		0	0						
	44.3 Transferred to surplus		0	0						
45.	Surplus adjustments:									
	45.1 Paid in		0	15,000,000						
	45.2 Transferred to capital (Stock Dividend)	0	0	0						
	45.3 Transferred from capital		0	0						
46.	Dividends to stockholders		0	0						
47.	Aggregate write-ins for gains or (losses) in surplus	(538,234)	(226,836)	(226,837)						
48.	Net change in capital & surplus (Lines 34 to 47)	13,669,923	14,513,685	21,934,467						
49.	Capital and surplus end of reporting period (Line 33 plus 48)	109,134,304	88,043,599	95,464,381						
	DETAILS OF WRITE-INS									
4701.	Change in Non-Admitted assets Affecting Net Income	(2,245,844)	988,745	988,745						
4702.	Change in Accrual affecting Net Income	1,707,610	(1,215,581)	(1,215,582)						
4703.	Change in GAAP vs Statutory Value of Short Term Investments		0	0						
4798.	Summary of remaining write-ins for Line 47 from overflow page									
4799.	Totals (Lines 4701 thru 4703 plus 4798) (Line 47 above)	(538,234)		(226,837)						

Report #2A: TENNCARE OPERATIONS STATEMENT OF REVENUES AND EXPENSES

5 Key 15 Th 5: 10	20	005	2004
Contract to the second	CURRENT	YEAR TO DATE	
	PERIOD	TOTAL	TOTAL
MEMBER MONTHS	257,701	789,004	1,000,888
REVENUES:			
TennCare Capitation Adverse Selection	\$46,956,333 0	\$150,721,649	\$177,746,728 0
B. Total TennCare Revenue (Lines 1 and 2)	46,956,333	0 150,721,649	177,746,728
Investment	40,558	143,174	148,094
5. Other Revenue (Provide detail)	0	0	(
5. TOTAL REVENUES (Lines 3 to 5)	46,996,891	150,864,822	177,894,823
EXPENSES:			
Medical and Hospital Services:			
7. Capitated Physician Services	0	0	
3. Fee-for Service Physician Services	14,775,207	46,489,499	56,718,53
Inpatient Hospital Services Outpatient Services	11,485,469	37,465,968	44,312,070
10. Outpatient Services 11. Emergency Room Services	6,302,180 4,204,851	21,038,757	23,093,44
12. Mental Health Services	4,204,001	12,971,304	14,110,38
13. Dental Services	l o	0	16,10
14. Vision Services	51,698	204,870	569,16
15. Pharmacy Services	(33,263)	(33,356)	3,25
16. Home Health Services	1,522,318	4,673,712	4,839,53
17. Chiropractic Services	0	0	
18. Radiology Services	1,216,853	1	
19. Laboratory Services	1,531,142	li i	
20. Durable Medical Equipment Services	1,515,057	4,773,190	
21. Transportation Services	495,747	1,374,823	1,643,18
22. Outside Referrals 23. Medical Incentive Pool and Withhold Adjustments	U	0	(29,080
24. Occupancy, Depreciation, and Amortization	0	0	(29,000
25. Other Medical and Hospital Services (Provide Detail)	24,298	74,399	213,740
26. Subtotal (Lines 7 to 25)	43,091,558	137,329,552	161,530,248
LESS:			
27. Net Reinsurance Recoveries Incurred	0	0	(
28. Copayments	0	0	(
29. Subrogation and Coordination of Benefits	0	0	(
30. Subtotal (Lines 27 to 29)	0	0	(
31 TOTAL MEDICAL AND HOSPITAL (Lines 26 minus line 30)	43,091,558	137,329,552	161,530,24
Administration:			
32. Compensation	2,667,163	9,460,171	11,519,47
33. Marketing	81,111	287,692	350,31
34. Interest Expense	0		ti .
35. Premium Tax Expense	939,938		
36. Occupancy, Depreciation and Amortization	217,122	11	II .
37. Other Administration (Provide detail)			00,00
38. TOTAL ADMINISTRATION (Lines 32 to 37)	3,905,333	13,535,270	16,424,57
39. TOTAL EXPENSES (Lines 31 and 38)	46,996,891	150,864,822	177,954,82
40. Extraordinary Item			
41. Provision for Income Tax		c	(18,000
42. NET INCOME (LOSS) (Line 6 less Lines 39, 40, and 41)	\$0	\$0	(\$42,000
Write-ins: REVENUES:			
Line 5 Contractual Recoveries		0	
Line 5 Deferral of Revenue for Administration fee Risk		0	
EXPENSES:			
Line 25 Reinsurance Expense		0	00.04
Line 25 Nurseline	24,298	11	93,61
Line 25 Risk Sharing (Option #2) New Risk Arrangement		11	120,12
Line 25 Risk Sharing during Exigency Line 37 Fines & Penalties- Regulatory Authorities	13:	ő	60,00

T:\Statutory\UDHP\2005\0905\Premium Enroll Utilization JDHP 0905.xls

	PR	PREMIUMS, ENRO	ROLLMENT	OLLMENT AND UTILIZATION TABLE	ZATION 1	ABLE					
Tann Cara Stindamant		Gomorg	Comprehensive	4	ď	٧	7	0	o	5	:
	-	(Hospital & M	& Medical)	-					0	2	
		2									
				Medicare	Vision	Dental	Federal Employees			TennCare	
	Total	Individual	Group	Supplement	Only	ýluO	Health Benefit Plan	Medicare	Medicaid	Self-Funded	Other
Total Members at end of:											
1. Prior Year	168,605		63,742			-	XXX	18,373	•	86,490	
2. First Quarter	145,532		38,414		1		XXX	18,937		88,181	1
3. Second Quarter	147,246		38,514	1			XXX	19,190		89,542	1
4. Third Quarter	139,325	•	36,818	1		1	XXX	19,623		82,884	1
5. Current Year	-			1		-	XXX			The state of the s	
6. Current Year Member Months	1,306,876	-	345,584	-	•	-	XXX	172,288		789,004	
Total Member Ambulatory Encounters for Year:											
7. Physician	721,319		177,286			1	XXX	184,978		329,055	
8. Non-Physician	104,594		22,032			•	XXX	16,551		66,011	
9. Total	825,913	-	199,318	•	,		XXX	201,529	0	425,066	
10. Hospital Patient Days Incurred	609'56		10,598	-		•	XXX	36,683		48,328	
11. Number of Inpatient Admissions	17,858		2,711	-	,	1	XXX	5,032		10,115	
12. Premiums Collected	204,748,203	-	83,764,828	-		1	XXX	105,638,294		1	15,345,081
13. Life Premiums Direct		1				1	XXX				
14. Property/Casualty Premiums Written											-
15. Health Premiums Earned	204,748,203		83,764,828					105,638,294			15,345,081
16. Property/Casualty Premiums Earned	•										
17. Amount Paid for Provision of Health Care Services	311,586,517		82,478,838		•		×××	83,640,511	0	133,492,867	11,974,300
18. Amount Incurred for Provision of Health Care Servicies	314,705,437		78.336.026				XXX	89.785.755	0	133,541,325	13.042.332



CASH FLOW

	UAUITI LOW	1	2
		Current Year	Prior Year Ended
		To Date	December 31
	Cash from Operations		
1 Pre	emiums collected net of reinsurance	484 .711 .559	716 , 135 , 530
	et investment income	_ ′ ′	
	scellaneous income		, ,
	otal (Lines 1 to 3)		(
	enefits and loss related payments		649,076,102
	et transfers to Separate, Segregated Accounts and Protected Cell Accounts		0
	ommissions, expenses paid and aggregate write-ins for deductions		80.003.875
	vidends paid to policyholders		
	deral and foreign income taxes paid (recovered) \$		
	otal (Lines 5 through 9)	(100000)	, ,
	et cash from operations (Line 4 minus Line 10)		(4,653,733
· · · · Ne	Cash from Investments	11,211,000	(4,000,700
10 Dro	Cash from investments oceeds from investments sold, matured or repaid:		
	oceeds from investments soid, matured or repaid. 1 Bonds	20 121 010	38,072,362
	L2 Stocks		
	.3 Mortgage loans	_	(
	.4 Real estate		(
	.5 Other invested assets	_	(
	.6 Net gains or (losses) on cash, cash equivalents and short-term investments		(
	1.7 Miscellaneous proceeds		
	.8 Total investment proceeds (Lines 12.1 to 12.7)	······································	/1 /// 503
	ost of investments acquired (long-term only):	20,404,540	
	i.1 Bonds	18 963 544	67 , 214 , 348
	.2 Stocks		13.359
	.3 Mortgage loans	•	(
	.4 Real estate		(
	.5 Other invested assets		(
	.6 Miscellaneous applications		
	1.7 Total investments acquired (Lines 13.1 to 13.6)	······································	`
	et increase (or decrease) in contract loans and premium notes		01,221,101
	et cash from investments (Line 12.8 minus Line 13.7 and Line 14)		(25,783,114
is. Ne	Cash from Financing and Miscellaneous Sources	1,471,390	(23,703,112
16 Co	ash provided (applied):		
	i.1 Surplus notes, capital notes	0	(
	.2 Capital and paid in surplus, less treasury stock.		15,000,000
	.3 Borrowed funds		
	.4 Net deposits on deposit-type contracts and other insurance liabilities		
	.5 Dividends to stockholders		
	.6 Other cash provided (applied).		
	et cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus		
· /· INE	, , ,	, , , , , ,	20,000,020
10 No	RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMI et change in cash, cash equivalents and short-term investments (Line 11 plus Lines 15 and 17)	(03/ 226)	(1 0/5 021
	et change in cash, cash equivalents and short-term investments (Line 11 plus Lines 15 and 17) ash, cash equivalents and short-term investments:	(934,220)	(1,040,92
	ish, cash equivalents and short-term investments:	16 164 201	17 210 212
	1.1 Beginning of year	15,230,065	
19.	Lita di perioa (Line 10 pias Line 19.1)	10,230,000	10, 104, 29

EXHIBIT OF PREMIUMS. ENROLLMENT AND UTILIZATION

_	LATIBIT OF PALIMIONS, LINAULINI AND UTILIZATION												
	1	Compre (Hospital a	hensive Medical)	4	5	6	7	8	9	10	11	12	13
		2	3				Federal Employees						
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Stop Loss	Disability Income	Long-Term Care	Other
Total Members at end of:					J,								
1. Prior Year	220,903	0	197,528	0	0	0	0	23,375	0	0	0	0	0
2 First Quarter	185,484	0	161,541	0	0	0	0	23,943	0	0	0	0	0
3 Second Quarter	184,581	0	160,276	0	0	0	0	24,305	0	0	0	0	0
4. Third Quarter	183 , 100		158,203					24,897					
5. Current Year	0												
6 Current Year Member Months	1,660,867		1,442,763					218,104					
Total Member Ambulatory Encounters for Period:													
7. Physician	847 , 195		616,404					230,497	294				
8. Non-Physician	143,411		121,649					21,676	86				
9. Total	990,606	0	738,053	0	0	0	0	252,173	380	0	0	0	0
10. Hospital Patient Days Incurred	84,639		37,497					46,904	238				
11. Number of Inpatient Admissions	16,263		9,702					6,499	62				
12. Health Premiums Written	495,623,811		337,505,046				7,328,581	130,614,595	58,759				20,116,830
13. Life Premiums Direct	0												
14. Property/Casualty Premiums Written	0												
15. Health Premiums Earned	495,623,811		337 , 505 , 046				7 , 328 , 581	130,614,595	58,759				20 , 116 , 830
16. Property/Casualty Premiums Earned	0												
17. Amount Paid for Provision of Health Care Services	411,530,709		283,076,715				8,040,329	103,392,745	1,163,052				15 ,857 ,868
18. Amount Incurred for Provision of Health Care Services	420,418,181		283,783,037				8,332,277	111,183,020	(27,734)				17,147,581

CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

	Aging Analysis of Unpaid	l Claims				
1	2	3	4	5	6	7
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total
Claims Unpaid (Reported)						
0199999 Individually Listed Claims Unpaid	0	0	0	0	0	0
0299999 Aggregate Accounts Not Individually Listed-Uncovered						0
0399999 Aggregate Accounts Not Individually Listed-Covered						0
0499999 Subtotals	0	0	0	0	0	0
0599999 Unreported Claims and Other Claim Reserves	XXX	XXX	XXX	XXX	XXX	77,519,270
0699999 Total Amounts Withheld	XXX	XXX	XXX	XXX	XXX	24,459,708
0799999 Total Claims Unpaid	XXX	XXX	XXX	XXX	XXX	101,978,978
0899999 Accrued Medical Incentive Pool and Bonus Amounts	XXX	XXX	XXX	XXX	XXX	813,470

9

STATEMENT AS OF SEPTEMBER 30, 2005 OF THE John Deere Health Plan, Inc.

UNDERWRITING AND INVESTMENT EXHIBIT

ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE

ANALYSIS OF CLAIMS UNPAID - PRIOR						
		ims	Liab			
	Paid Yea		End of Curr		5	6
	1	2	3	4		
						Estimated Claim
	On		On			Reserve and Claim
	Claims Incurred Prior	On	Claims Unpaid	On	Claims Incurred	Liability
	to January 1 of	Claims Incurred	Dec. 31	Claims Incurred	in Prior Years	Dec. 31 of
Line of Business	Current Year	During the Year	of Prior Year	During the Year	(Columns 1 + 3)	Prior Year
Comprehensive (hospital & medical)	51,355,165	229,687,741	14,079,396	55 , 588 , 643	65 , 434 , 561	69,680,828
Medicare Supplement					0	0
					_	_
3. Dental Only					0	J0
					_	_
4. Vision Only					0	Ω
					=	
5. Federal Employees Health Benefits Plan	1,445,932	7 ,610 ,718		2,030,116	1,445,932	1,353,000
					.=	
6. Title XVIII - Medicare	13,848,524	90,089,646	4,093,706	26, 362, 927	17,942,230	21,929,031
	5 004		404 004	(50)	400 005	100 011
7. Title XIX - Medicaid	5,821		134,084	(56)	139,905	128,644
	740 504	40 040 707			740 504	_
8. Other Health	713,581	16,612,707			713,581	J
	07 000 000	244 000 040	40 207 400	00 004 000	05 676 000	02 004 502
9. Health Subtotal (Lines 1 to 8)	67,369,023	344,000,812	18,307,186	83,981,630	85,676,209	93,091,503
40 11 11 11 11 11 11					^	
10. Healthcare receivables (a)						
44 Ohanasa kasik					0	^
11. Other non-health						J
12. Medical insentius peals and hange amounts	2,556,180	(3,187,000)			2,556,180	337.725
12. Medical incentive pools and bonus amounts	2,000,100	(3, 10 <i>1</i> ,000)		013,470		331 ,123
10. Table	69,925,203	340,813,812	18,307,186	84,795,100	88,232,389	93,429,228
13. Totals	09,920,203	340,013,812	10,307,180	04,790,100	00,232,389	93,429,228

⁽a) Excludes \$ loans and advances to providers not yet expensed.

NOTES TO FINANCIAL STATEMENTS

17c. Wash Sales

The plan did not engage in wash sales.

Events having occured subsequent to the end of the most recent fiscal year which have a material impact on John Deere Health Plan, Inc.:

JDHP has established an allowance of \$2.4 Million for premium uncollectibility related to the Federal Employee Health Benefit Plan (FEHBP) account due to premium receivable discrepancies over 60 days old. The FEHBP is a "self bill" group. Self bill groups are allowed to pay premium based on their own enrollment data. The FEHBP group is unique in that they have not sent adequate enrollment data. JDHP has attempted to quantify the uncollectible balance in the past; however, because the FEHBP remittance history is inconsistent and because their enrollment data does not tie to premium it was difficult to determine the exact amount of uncollectible premium. As of January 1, 2005, the FEHBP account has transitioned to a retrospectively rated contract and future collection risk has been mitigated.

GENERAL INTERROGATORIES

(Responses to these interrogatories should be based on changes that have occurred since the prior year end unless otherwise noted.)

PART 1 - COMMON INTERROGATORIES GENERAL

1.1			ccounting policy changes that would requi				Yes	[]	No [X]
1.2	If yes, explain:								
2.1			nsactions requiring the filing of Disclosure						
2.1							Yes	[]	No [X]
2.2	If yes, has the report b	een filed with the domiciliary	state?				Yes	[]	No []
3.1			statement in the charter, by-laws, articles				Yes	[]	No [X]
3.2	If yes, date of change:								
	If not previously filed, f	furnish herewith a certified co	ppy of the instrument as amended.						
4.	Have there been any s	substantial changes in the or	ganizational chart since the prior quarter e	nd?			Yes	[X]	No []
	If yes, complete the So	chedule Y - Part 1 - organiza	tional chart.						
5.1	Has the reporting entit	y been a party to a merger o	r consolidation during the period covered b	by this statement?			Yes		No [X]
5.2	If yes, provide the nam	-	Code, and state of domicile (use two letter	-					
			1	2	3				
			Name of Entity	NAIC Company Cod					
				1	I				
6.			greement, including third-party administra						
	fact, or similar agreem If yes, attach an explan		nificant changes regarding the terms of th	e agreement or princip	oals involved?		Yes [] No	[X]	NA []
7.1	State as of what date t	the latest financial examination	on of the reporting entity was made or is b	eing made				12/	/31/2002
7.2			ation report became available from either heet and not the date the report was comp					12/	/31/2002
7.3	the reporting entity. Th	is is the release date or com	on report became available to other states pletion date of the examination report and	not the date of the ex	amination (bala	ance sheet		04/	/28/2004
7.4	By what department or							0 .,	20,200.
	Illinois Department	of Insurance							
8.1	or revoked by any gove	ernmental entity during the re	chority, licenses or registrations (including eporting period? (You need not report an	action, either formal or	informal, if a		Voc	. []	No [X]
8.2	If yes, give full informa	,					168	. []	NO [X]
9.1	Is the company a subs	sidiary of a bank holding com	pany regulated by the Federal Reserve Bo	ard?			Yes		No [X]
9.2	If response to 9.1 is ye	es, please identify the name of	of the bank holding company.						
9.3	Is the company affiliate	ed with one or more banks, t	hrifts or securities firms?				Yes	[]	No [X]
9.4	federal regulatory serv	ices agency [i.e. the Federal S), the Federal Deposit Insu	names and location (city and state of the r Reserve Board (FRB), the Office of the C rance Corporation (FDIC) and the Securities	omptroller of the Curre	ency (OCC), th	e Office of			
		1	2 Location	3	4	5	6		7
		ate Name	(City, State)	FRB	occ	OTS	FDIC		SEC

GENERAL INTERROGATORIES

FINANCIAL

	Does the reporting entity report any amounts due from parent, subs If yes, indicate any amounts receivable from parent included in the	\$	Yes [X] No []			
10.2	in yes, indicate any amounts receivable from paront moladed in the		ESTMENT		Ψ	101, 120
	Has there been any change in the reporting entity's own preferred of lf yes, explain:					Yes [] No [X]
	Were any of the stocks, bonds, or other assets of the reporting entition use by another person? (Exclude securities under securities lend lf yes, give full and complete information relating thereto:	ding agreeme	ents.)	·		Yes [] No [X]
13.	Amount of real estate and mortgages held in other invested assets					0
14.	Amount of real estate and mortgages held in short-term investment	s:			\$	0
15.1	Does the reporting entity have any investments in parent, subsidia	ries and affilia	ates?			Yes [] No [X]
15.2	If yes, please complete the following:			1	2	
15.21 15.22			Book/ Carryi \$	/ear-End Adjusted ng Value	Current Quarter Statement Value \$	
15.23 15.24	Common Stock		\$		\$ \$	
15.25 15.26	Mortgage Loans on Real Estate		\$		\$ \$	
15.27	to 15.26)				\$	
15.28	Total Investment in Parent included in Lines 15.21 to 15.26 above Has the reporting entity entered into any hedging transactions reporting transactions reporting entity entered into any hedging transactions reporting tr		·		\$	 Yes [] No [X]
	If yes, has a comprehensive description of the hedging program ber					Yes [] No []
	If no, attach a description with this statement.					
17.	Excluding items in Schedule E, real estate, mortgage loans and inv deposit boxes, were all stocks, bonds and other securities, owned t qualified bank or trust company in accordance with Part 1 - Genera Financial Condition Examiners Handbook?	hroughout the	current year held p	ursuant to a custodial	agreement with a	Yes [X] No []
17.1	For all agreements that comply with the requirements of the NAIC F	inancial Con	dition Examiners Ha	ndbook, complete the	e following:	
	1 Name of Custodian(s) Mellon Trust Company of Illinois		Chicago, IL	2 Custodian Address		
	action react company or removement		John Sago , Tammin			
17.2	For all agreements that do not comply with the requirements of the location and a complete explanation:	NAIC Financi	ial Condition Examin	ers Handbook, provid	de the name,	
	1 Name(s)	2 Location(s	i)	3 Complete Explan	ation(s)	
17.3	Have there been any changes, including name changes in the cust	odian(s) ident	tified in 17.1 during t	ne current quarter?	_	Yes [] No [X]
	If yes, give full and complete information relating thereto:	(-,	,			
	1 2		3	4		
	Old Custodian New Custo	dian	Date of Change	Reas	on	
17.5	Identify all investment advisors, brokers/dealers or individuals acting accounts, handle securities and have authority to make investments			have access to the ir	vestment	
	Central Registration Depository		2 ne(s)		3 Iress	
18.1 18.2	Have all the filing requirements of the <i>Purposes and Procedures M.</i> If no, list exceptions:	anual of the N	NAIC Securities Valu	ation Office been folk	owed?	Yes [X] No []

SCHEDULE A - VERIFICATION

Real Estate											
	1	2									
NIONIE	Year to Date	Prior Year Ended December 31									
1. Book/adjusted carrying value, December 31 of prior year	0	0									
2. Increase (decrease) by adjustment		0									
3. Cost of acquired		0									
Cost of additions to and permanent improvements		0									
5. Total profit (loss) on sales		0									
Increase (decrease) by foreign exchange adjustment		0									
7. Amount received on sales		0									
Book/adjusted carrying value at end of current period	0	0									
9. Total valuation allowance		0									
10. Subtotal (Lines 8 plus 9)		0									
11. Total nonadmitted amounts		0									
12. Statement value, current period (Page 2, real estate lines, Net Admitted Assets column)	0	0									

SCHEDULE B – VERIFICATION

Mortgage Loans												
	1	2 Prior Year Ended										
	Year to Date	December 31										
Book/adjusted carrying value, December 31 of prior year	0	0										
2. Amount loaned during period:												
2.1. Actual cost at time of acquisitions		0										
2.2. Additional investment made after acquisitions 3. Accrual of discount and mortgage interest points and commitment fees		0										
Accrual of discount and mortgage interest points and commitment fees		0										
Increase (decrease) by adjustment		1 0 I										
J. Total profit (1055) off Sale												
7. Amortization of premium		0										
7. Amortization of premium 8. Increase (decrease) by foreign exchange adjustment 9. Book value/recorded investment excluding accrued interest on mortgages owned at end of current period		0										
9. Book value/recorded investment excluding accrued interest on mortgages owned at end of current period	0	0										
10. Total valuation allowance		0										
11. Subtotal (Lines 9 plus 10)	0	0										
12. Total nonadmitted amounts		0										
13. Statement value of mortgages owned at end of current period (Page 2, mortgage lines, Net Admitted Assets												
column)	0	0										

SCHEDULE BA – VERIFICATION

Other Invested Assets Included in Schedule BA Prior Year Ended Year to Date December 31 ..0 3. Accrual of discount 0 Increase (decrease) by adjustment. Total profit (loss) on sale Amounts paid on account or in full during the period Amortization of premium 0 Increase (decrease) by foreign exchange adjustment.

Book/adjusted carrying value of long-term invested assets at end of current period 0 ..0 10. 11. 12. Total valuation allowance Subtotal (Lines 9 plus 10) 0 ..0 Total nonadmitted amounts 0 Statement value of long-term invested assets at end of current period (Page 2, Line 7, Column 3)

SCHEDULE D – VERIFICATION

Bonds and Stocks											
	1 Year to Date	2 Prior Year Ended December 31									
Book/adjusted carrying value of bonds and stocks, December 31 of prior year	190,395,262	164,017,771									
Cost of bonds and stocks acquired	18,963,543	67 , 227 , 707									
3. Accrual of discount	144,UZ1	289,832									
Increase (decrease) by adjustment Increase (decrease) by foreign exchange adjustment Total profit (loss) on disposal		(12,867)									
Increase (decrease) by foreign exchange adjustment		0									
6. Total profit (loss) on disposal	173,468	860 , 818									
7. Consideration for bonds and stocks disposed of 8. Amortization of premium 9. Book/adjusted carrying value, current period	20,434,940	41,444,592									
8. Amortization of premium	389,868	543,407									
Book/adjusted carrying value, current period		190,395,262									
1 10. Total valuation allowance		0 1									
11. Subtotal (Lines 9 plus 10)	188,851,492	190,395,262									
12. Total nonadmitted amounts		0									
13. Statement value	188,851,492	190,395,262									

SCHEDULE D - PART 1B

Showing the Acquisitions, Dispositions and Non-Trading Activity

During the Current Quarter for all Bonds and Preferred Stock by Rating Class

	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	referred Stock by Rating C 4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
BONDS								
1. Class 1	207,009,421	19,889,994	24,854,894	(588,063)	195,049,708	207,009,421	201,456,458	202,970,014
2. Class 2	2,126,104			498,994	3,581,500	2,126,104	2,625,098	3,589,538
3. Class 3	0				0	0	0	0
4. Class 4	0				0	0	0	0
5. Class 5	0				0	0	0	0
6. Class 6	0				0	0	0	0
7. Total Bonds	209,135,525	19,889,994	24,854,894	(89,069)	198,631,208	209, 135, 525	204,081,556	206,559,552
PREFERRED STOCK								
8. Class 1	0				0	0	0	0
9. Class 2	0				0	0	0	0
10. Class 3	0				0	0	0	0
11. Class 4	0				0	0	0	0
12. Class 5	0				0	0	0	0
13. Class 6	0				0	0	0	0
14. Total Preferred Stock	0	0	0	0	0	0	0	0
15. Total Bonds and Preferred Stock	209,135,525	19,889,994	24,854,894	(89,069)	198,631,208	209, 135, 525	204,081,556	206,559,552

SCHEDULE DA - PART 1

Short-Term Investments Owned End of Current Quarter

	1	2	3	4	5								
					Paid for Accrued								
	Book/Adjusted			Interest Collected	Interest								
	Carrying Value	Par Value	Actual Cost	Year To Date	Year To Date								
8299999 Totals	15,230,065	XXX	15,230,065	162,473									

SCHEDULE DA - PART 2- VERIFICATION

Short-Term Investments Owned

Short-refill investments owned		
	1	2
		Prior Year Ended
	Year To Date	December 31
Book/adjusted carrying value, December 31 of prior year		17,210,212
Cost of short-term investments acquired	60 , 057 , 707	121 , 140 , 649
Increase (decrease) by adjustment		(1,310)
Increase (decrease) by foreign exchange adjustment		0
Total profit (loss) on disposal of short-term investments		
Consideration received on disposal of short-term investments	60,991,933	122 , 185 , 260
7. Book/adjusted carrying value, current period	15,230,065	16,164,291
8. Total valuation allowance		0
9. Subtotal (Lines 7 plus 8)		16,164,291
10. Total nonadmitted amounts		
11. Statement value (Lines 9 minus 10)		16, 164, 291
12. Income collected during period		196 , 137
13. Income earned during period	301,431	191,136

Schedule DB - Part F - Section 1 NONE

Schedule DB - Part F - Section 2

NONE

SCHEDULE S—CEDED REINSURANCE Showing All New Reinsurers - Current Year to Date

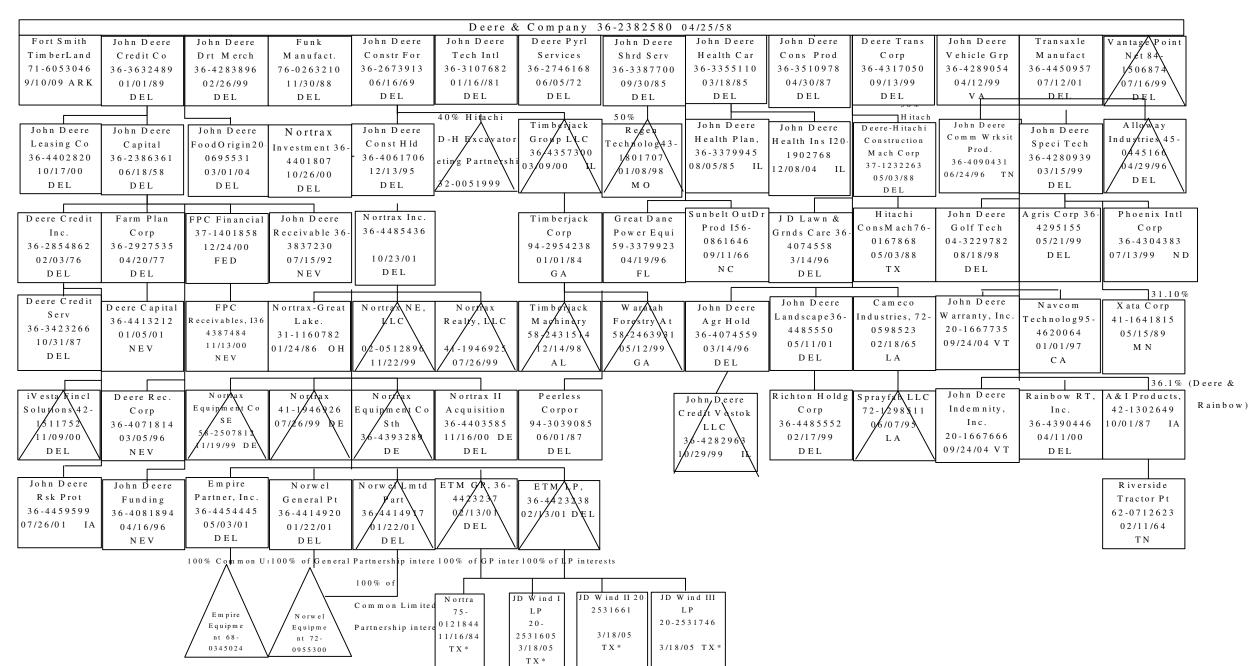
1	2	3	4	5 Is Insurer
NAIC	Federal			Authorized?
Company Code	ID Number	Name of Reinsurer LIFE AND ANNUITY AFFILIATES	Location	(Yes or No)
		LIFE AND ANNUITY AFFILIATES		
		LIFE AND ANNUITY NON-AFFILIATES		
		ACCIDENT AND HEALTH AFFILIATES		
39845	48-0921045	ACCIDENT AND HEALTH NON-AFFILIATES Employers Reinsurance Corporation	Overland Park, Kansas	Yes
		Liliproyers Kernsurance Corporation	Overrand rank, Nansas	

SCHEDULE T PREMIUMS AND OTHER CONSIDERATIONS

			1	2	Illocated by Sta	D	irect Business (Only Year-to-Da	_	
	States, Etc.		Guaranty Fund (Yes or No)	Is Insurer Licensed? (Yes or No)	3 Accident and Health Premiums	4 Medicare Title XVIII	5 Medicaid Title XIX	6 Federal Employees Health Benefit Program Premiums	7 Life and Annuity Premiums and Deposit-Type Contract Funds	8 Property/ Casualty Premiums
	Alabama			No						
	Alaska			No						
	Arizona			No No						
	Arkansas			No No						
	Colorado			No						
	Connecticut			No						
8.	Delaware	DE		No						
9.	District of Columbia	DC		No						
	Florida			No						
	Georgia									
	Hawaii		,	No No						
	Illinois		Yes	No Yes	66 , 457 , 043	51,069				
	Indiana		103	No	00,407,040					
	lowa		No	Yes	169,726,558	1,237,274	58,759	7,328,581		
	Kansas			No						
18.	Kentucky			No						
	Louisiana									
	Maine			No				<u> </u>	<u> </u>	
	Maryland		,	No No						
	Massachusetts			NoNo						
	Michigan Minnesota			No						
	Mississippi		,	No						
	Missouri			No						
27.	Montana	MT		No						
28.	Nebraska	NE		No						
29.	Nevada	NV		No						
	New Hampshire			No						
	New Jersey			No						
	New York	NM NV		No No						
	North Carolina			NoNo						
	North Dakota			No.						
	Ohio		,	No						
37.	Oklahoma	OK		No						
	Oregon		,	No						
	Pennsylvania			No						
	Rhode Island			No						
	South Carolina			No No						
	Tennessee		No	Yes	99 , 498 , 057	105,638,294				
	Texas		١١٥	No	55,450,007	100 ,000 ,204				
	Utah			No						
	Vermont			No						
	Virginia		No	Yes	21,940,219	23 , 687 , 958		<u> </u>	<u> </u>	
	Washington			No				.	<u> </u>	
	West Virginia			No				<u> </u>	<u> </u>	
	Wisconsin		,	No				<u> </u>	l	
	Wyoming								l	
	American Samoa								L	
	Puerto Rico									
	U.S. Virgin Islands									
	Canada									
	Aggregate Other Alien		XXX	XXX	0	0	0	0	0	
	Subtotal		XXX	XXX	357 ,621 ,876	130,614,595	58 , 759	7,328,581	0	
59.	Reporting entity contributions for E Benefit Plans	mployee	XXX	XXX						
60	Total (Direct Business)		XXX	(a) 4	357,621,876	130,614,595	58,759	7,328,581	0	(
50.	DETAILS OF WRITE-INS		7///	(a) -T	55.,521,010	,011,000	55,100	.,020,001	<u> </u>	
5701.								<u> </u>	<u> </u>	
5702.										
703.										
798.	Summary of remaining write-ins for	or Line 57 from	overflow pag	e	0	0	0	0	0	
	Totals (Lines 5701 thru 5703 plus				0	0	0	0	0	(

⁽a) Insert the number of yes responses except for Canada and other Alien.

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP PART 1 - ORGANIZATIONAL CHART



OVERFLOW PAGE FOR WRITE-INS

MQ003 Additional Aggregate Lines for Page 03 Line 21. *LIAB

	1	2	3	4
	Covered	Uncovered	Total	Total
2104. Accounts Payable - Other	171,539		171,539	477,390
2197. Summary of remaining write-ins for Line 21 from Page 03	171,539	0	171,539	477,390
	171 530	0		

Schedule A - Part 2

NONE

Schedule A - Part 3

NONE

Schedule B - Part 1

NONE

Schedule B - Part 2

NONE

Schedule BA - Part 1

NONE

Schedule BA - Part 2

NONE

SCHEDULE D - PART 3

Show All Long-Term Bonds and Stock Acquired by the Company During the Current Quarter

Show All Long-Term Bonds and Stock Acquired by the Company During the Current Quarter													
1	2	3	4	5	6	7	8	9	10				
									NAIC				
									Designation or				
CUSIP					Number of	Actual		Paid for Accrued	Market				
Identification	Description	Foreign	Date Acquired	Name of Vendor	Shares of Stock	Cost	Par Value	Interest and Dividends	Indicator (a)				
BONDS													
Special Revenue & Ass													
	FNR 2005-41 LY 5.500% 04/25/34		07/07/2005	Salomon Smith Barney (Bonds)		1,004,531	1,000,000	1,681	11				
31394E-MW-5	FNR 2005-62 DT 5.000% 05/25/30		06/30/2005	NBC Sun Trust Capital Markets		1,007,344	1,000,000	694	11				
31395W-ER-4	FHLMC 3007 LB 4.500% 04/15/25. FHLMC 3012 TM 4.500% 03/15/25.		09/20/2005	Robert W. Baird. Vining Sparks.		992,656	1,000,000	2,750	1				
31395W-WF-0	FHLMC 3012 TM 4.500% 03/15/25		09/20/2005	Vining Sparks		997,344	1,000,000	2,750					
	Bonds - Special Revenue					4,001,875	4,000,000	7,875	XXX				
Industrial & Miscella									_				
	Marshall & IIsley Corp 4.375% 08/01/09		09/20/2005	Robert W. Baird		497 , 785	500,000						
	· Bonds – Industrial, Misc.					497,785	500,000	3,160					
6099997 - Total -			4,499,660	4,500,000	11,035	XXX							
6099999 - Total -	Bonds					4,499,660	4,500,000	11,035	XXX				
6599999 - Total -	Preferred Stocks					0	XXX	0	XXX				
7299999 - Total -	Common Stocks					0	XXX	0	XXX				
7399999 - Total -	Preferred and Common Stocks					0	XXX	0	XXX				
									•				
·													

1					-	-			†				

7499999 - Totals						4,499,660	XXX	11,035	XXX				

⁽a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues ...

SCHEDULE D - PART 4

					Show All Lo	na-Term Bor	nds and Stoo	ck Sold. Rede	emed or Oth	erwise Dispos	ed of by the C	ompany Durir	na the Current	Quarter						
1	2	3 4	5	6	7	8	9	10	omed or our		ook/Adjusted Ca		ig the current	16	17	18	19	20	21	22
									44	40	40	44	45	1					1	
		F							11	12	13	14	15						1	NAIC
		0																	1	Desig-
		r						Prior Year	Unrealized		Current Year's Other Than		Total Foreign	Book/ Adjusted	Foreign			Bond Interest/Stock	1	nation or
CUSIP		i		Number of				Book/Adjusted	Valuation	Current Year's		Total Change in		Carrying Value		Realized Gain	Total Gain	Dividends	1	Market
Identi-	Description	g Disposal	Name of December of	Shares of	0	Dan Value	A - t 1 O t	Carrying	Increase/	(Amortization)/	Impairment	B/A. C.V.	Change in	at	(Loss) on	(Loss) on	(Loss) on	Received	Maturity	Indicator
fication BONDS	Description	n Date	Name of Purchaser	Stock	Consideration	Par Value	Actual Cost	Value	(Decrease)	Accretion	Recognized	(11 + 12 - 13)	B/A. C.V.	Disposal Date	Disposal	Disposal	Disposal	During Year	Date	(a)
US Governmen	ts Federal Home Loan Bank		Salomon Smith Barney	ı	1			1												
3133MJ-UR-9	4.125% 11/15/06	07/27/2005	5 (Bonds)		999,720	1,000,000	979,880	991,880		2,396		2,396		994, 276		5,444	5,444	28,990	11/15/2006	
31359M-LH-4	Fannie Mae 4.375% 10/15/06	07/27/2005	Salomon Smith Barney 5. (Bonds)		1,003,250	1,000,000	974.805	989.843		3.147		3, 147				10,260	10,260	34,392	10/15/2006	1
	GNMA Pool #0283327						·	·		0,147		0,147		*						
36220N-VU-8	9.000% 12/15/19 GNMA Pool #0283327	07/01/2005	1	-	53	53	53	53				0		53		†	0		12/15/2019	
36220N-VU-8	9.000% 12/15/19 GNMA Pool #0283327	08/01/2005	D. Paydown		57	57	57	57				0		57			0	3	12/15/2019	
36220N-VU-8	9.000% 12/15/19	09/01/200	5 Paydown		66	66	67	66				0		66			0	5	12/15/2019	
36220Y-KL-6	GNMA Pool #0291999 9.000% 10/15/05	07/01/200	5. Paydown.		212	212	213	211		1		1		212			0	11	10/15/2005	1
36220Y-KL-6	GNMA Pool #0291999 9.000% 10/15/05	08/01/2005	5 Paydown		214	214	215	213		1		1		214			0	13	10/15/2005	1
36220Y-KL-6	GNMA Pool #0291999 9.000% 10/15/05.	09/01/2005	,,		164	164	164	163		4		4		164			0	44	10/15/2005	4
	Bonds - U.S. Governments	09/01/2003	Paydowii		2,003,736	2,000,766	1,955,453	1,982,487	0	5,545	0	5,545	0	1,988,032	0	15,704	15,704	63,428	XXX	XXX
Special Reve	nue & Assessment		ı	1						1						•				
312911-T8-3	FHLMC 1369- H 6.500% 09/15/07	07/01/200	5. Paydown		13,468	13,468	12,996	13,368		99		99		13,468			0	511	09/15/2007	1
312911-T8-3	FHLMC 1369- H 6.500% 09/15/07	08/01/2005	5 Paydown		11,980	11,980	11,560	11,891		88		88		11,980			0	519	09/15/2007	1
312911-T8-3	FHLMC 1369- H 6.500% 09/15/07	09/01/200	1		12,560	12,560	12,121	12,468		03		03		12,560			0	612	09/15/2007	1
	FHLMC 1385-H 6.500%		1				·			2	• • • • • • • • • • • • • • • • • • • •	n						012		4
312912-KD-9	.08/15/07 FHLMC 1449 H 7.000%	07/01/2005			293	293	287	291		2		∠		293			0		08/15/2007	
312913-40-6	12/15/07FHLMC 1449 H 7.000%	07/01/200	5 Paydown		11,165	11 , 165	11,008	11,095		70		70		11 , 165			0	456	12/15/2007	
312913-40-6	.12/15/07FHLMC 1449 H 7.000%	08/01/200	5 Paydown		11,316	11,316	11 , 156	11,244		71		71		11,316			0	528	12/15/2007	
312913-40-6	12/15/07	09/01/200	5 Paydown		10,647	10,647	10,498	10,580		67		67		10 , 647			0	559	12/15/2007	
312915-DN-8	FHLMC 1490- PH 6.250% 04/15/08	07/01/200	. Paydown.		19,912	19,912	19,647	19,776		136		136		19,912			0	726	04/15/2008	1
312915-DN-8	FHLMC 1490- PH 6.250% .04/15/08	08/01/2005	5 Paydown		19,274	19,274	19,018	19,142		132		132		19,274			0	803	04/15/2008	1
312915-DN-8	FHLMC 1490- PH 6.250% 04/15/08.	09/01/200	1		18,653		18,406	18,526		128		128		.18,653			0	874	04/15/2008	1
	FHLMC 2424-VB 6.000%		1	••••••	· ·	·				416		416		64,023						4
31339W-E3-6	01/15/19 FHLMC 2424-VB 6.000%	07/01/2005	,		64,023	64,023	62,740	63,607									0	2,241	01/15/2019	
31339W-E3-6	01/15/19 FHLMC 2424-VB 6.000%	08/01/200	5 Paydown		68,818	68,818	67 , 439			447		447		68,818			0	2,753	01/15/2019	
31339W-E3-6	01/15/19	09/01/2005	5 Paydown		90,858	90,858	89,037			590		590		90,858			0	4,089	01/15/2019	
3133T1-SR-4	. 10/15/08	07/01/200	5 Paydown		40,780	40 , 780	41,507	41,055		(275)		(275)		40,780			0	1,427	10/15/2007	1
3133T1-SR-4_	FHLMC 1601-PJ 6.000% 10/15/08	08/01/200	. Paydown		39,370	39,370	40,072	39,636		(265)		(265)		39,370			0	1,575	10/15/2007	1
3133T1-SR-4	FHLMC 1601-PJ 6.000% 10/15/08	09/01/2005	5 Paydown		39,412	39,412	40 , 114	39,677		(266)		(266)		39,412			0	1,774	10/15/2007	1
3133T4-XM-3	FHLMC-GNMA 1708-E 6.000% 03/15/09.	07/01/2005			17,913		17,023	17 , 421		492		492					Λ.		03/15/2009	1
	FHLMC-GNMA 1708-E		1		·		·							*						4
3133T4-XM-3	6.000% 03/15/09 FHLMC-GNMA 1708-E	08/01/2005	1	·	19,037	19,037	18,091	18,514		523		523	·····	19,037			0	761	03/15/2009	1
3133T4-XM-3	6.000% 03/15/09 FHLMC 1808-A 5.000%	09/01/2008	5 Paydown		17,019	17,019	16,173	16,551		467		467	ļ	17 , 019		 	0	766	03/15/2009	
3133T6-QQ-7	10/15/07	07/01/2005	Paydown	1	7 , 327	7,327	6,876	7,080		247		247	L	7.327			0	214	10/15/2007	11

SCHEDULE D - PART 4

Show All Long-Term Bonds and Stock Sold, Redeemed or Otherwise Disposed of by the Company During the Current Quarter Change in Book/Adjusted Carrying Value 20 21 22 5 17 18 19 11 NAIC Desig-Current Year's Book/ Bond nation Total Foreign Prior Year Unrealized Other Than Adjusted Foreign nterest/Stock or **CUSIP** Number of Book/Adjusted Valuation Current Year's Temporary Total Change in Exchange arrying Value xchange Gain Realized Gain Total Gain Dividends Market Disposal Shares of Carrying Increase/ (Amortization) Impairment B/A. C.V. Change in (Loss) on (Loss) on (Loss) on Received Maturity Indicato Identification Description Date Name of Purchaser Stock Consideration Par Value Actual Cost Value (Decrease) Accretion Recognized (11 + 12 - 13)B/A. C.V. Disposal Date Disposal Disposal Disposal **During Year** Date (a) FHLMC 1808-A 5.000% 3133T6-QQ-7 .08/01/2005... ..6,565 .10/15/2007 ..229 ..226 FHLMC 1808-A 5.000% 3133T6-QQ-7. ..5,986 .10/15/2007 .09/01/2005. ..6,195 ..6,195 ..5,813 ..209 .209 Pavdown ..6, 19 ..232 FHLMC 2038-PC 5.500% 3133TD-7D-2 .07/01/2005. .23.218 ...23.218 .23.043 .23.054 .23.21 .02/15/2028 Pavdown FHLMC 2038-PC 5.500% .08/01/2005. 3133TD-7D-2 .23.989 ..23.989 .23.809 .23.820 ..169 .23.989 .02/15/2028. avdown FHLMC 2038-PC 5.500% 3133TD-7D-2 09/01/2005 .26,647 ..26,647 26.447 .26,460 18 .26,64 1 099 .02/15/2028 02/15/28 avdown FNMA 1993-014- A 6.0009 31358T-TB-5 02/25/08. .07/01/2005. ..1,838 ..1,838 .1,826 ..1,828 ..1,838 .02/25/2008 FNMA 1993-014- A 6.0009 31358T-TB-5. ..1,596 ..1,596 ..1,585 ..1,588 02/25/08. .08/01/2005 aydown.. .02/25/2008 FNMA 1993-014- A 6.000 ..1,577 ..1.577 .1.567 31358T-TB-5 ..1.569 .02/25/2008 02/25/08 .09/01/2005. ..1.57 FNMA 1993-93 G 6.750% 31359A-EG-0. .07/01/2005. .10.860 ..10.860 .10.916 .10.853 .10.86 .05/25/2008 Pavdown.. 31359A-EG-0. .10,540 ..10 , 594 ..10,533 .05/25/2008. 05/25/08. .08/01/2005... .10.540 .10.54 Pavdown NMA 1993-93 G 6.750% 31359A-EG-0. .09/01/2005. .10.228 .10.228 ..10.281 .10.222 .10.228 .05/25/2008 05/25/08 Pavdown FNMA 1996-64 PK 6.500% 31359N-AR-2 05/18/11 .07/01/2005... Pavdown 14.696 14,696 .14,547 14.69 557 .05/18/2011 FNMA 1996-64 PK 6.500% ...17 , 27 31359N-AR-2 .08/01/2005... .17,270 ..17,270 .17,062 ..17,095 .05/18/2011 05/18/11 aydown. FNMA 1996-64 PK 6.500% 31359N-AR-2 05/18/11. .09/01/2005. ..4,843 ..4,843 .4.79 .05/18/2011 FNMA 2002-7 QM 6.000% 31392B-2R-6 .07/01/2005... 46.630 46,630 .46,951 .46,792 .46.63 .04/25/2011 FNMA 2002-7 QM 6.000% 31392B-2R-6 ..51,161 .51,338 .51,16 .04/25/2011 .08/01/2005. .51,161 .51,512 FNMA 2002-7 QM 6.000% 31392B-2R-6 .09/01/2005... .52,231 .52,231 .52,590 .52,412 ..(181 .52,23 .04/25/2011 02/25/20. FNMA 2003-15 CP 4.500% 31392J-LK-3, 12/25/26... .08/01/2005. Pavdown ...27.836 ..27.836 .28.010 .27,909 .27.836 .06/25/2006. FNMA 2003-15 CP 4.500% 31392J-LK-3 09/01/2005 .82.990 .82.990 .83.509 .83.208 ..(218 .82.990 06/25/2006 12/25/26 Pavdown . (218) .2.801 FNMA 2003-42 HC 4.500% 31393B-WE-1. .07/01/2005. .25.841 .25.856 .03/25/2015 12/25/17 .25.841 .25.865 .25.84 avdown. FNMA 2003-42 HC 4.500% 31393B-WE-1 .25.408 .03/25/2015 12/25/17. .08/01/2005... Paydown, .25.384 ..25,384 .25,398 . 25, 384 762 FNMA 2003-42 HC 4.500% 31393B-WE-1 .09/01/2005. ..26,391 26,416 .26,406 .03/25/2015 .26,391 .26,39 89 12/25/17 avdown GNMA 2001-6 PM 6.500% 383739-RL-5 .07/01/2005. 44,430 44,430 45,708 .45,344 ..(914 . (914) _44,430 1,685 .02/16/2018. 06/16/30 aydown. GNMA 2001-6 PM 6.500% 383739-RL-5. .08/01/2005. aydown.. .33,319 .33,319 .34,004 ..(68 .33,31 .02/16/2018 GNMA 2001-6 PM 6.500% .09/01/2005. .02/16/2018 06/16/30 3199999 - Bonds - Special Revenues 1.149.319 1.149.319 1.144.749 1.147.935 1.384 1.384 1.149.319 45.193 XXX XXX Industrial & Miscellaneous 5.750% 11/01/08. .07/28/2005. .987.202 .950.000 .921.728 .933.901 ..2.198 ..2.198 ..936.099 .51.103 41.120 .11/01/2008. .1FE.. Legg Mason. SBC Commun Capital Corp 84534E-CA-4... 6.250% 07/07/05. 1,000,000 1,000,000 .993.864 1,000,000 .07/07/2005 .1FE.. .946.000 .6.136 .6.136 4599999 - Bonds - Industrial and Miscellaneous 1,987,202 1,950,000 1,867,728 1,927,765 8,334 8,334 1,936,099 51 103 51 103 97,023 XXX XXX XXX XXX XXX 6599999 - Total - Preferred Stocks XXX XXX XXX 7299999 - Total - Common Stocks XXX XXX XXX 7399999 - Total - Preferred and Common Stocks XXX XXX XXX 5.140.257 XXX 4.967.930 XXX XXX

⁽a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues

Schedule DB - Part A - Section 1

NONE

Schedule DB - Part B - Section 1

NONE

Schedule DB - Part C - Section 1

NONE

Schedule DB - Part D - Section 1

NONE

Schedule E - Part 1

Schedule E - Part 2

NONE

STATEMENT AS OF SEPTEMBER 30, 2005 OF JOHN DEERE HEALTH PLAN, INC.

EXHIBIT 2-ACCIDENT AND HEALTH PREMIUMS DUE AND UNPAID

.000
o,
\$
ŏ
۵
ap
>
Recei
æ
Š
Ē
.≘
ē
ď
SS
ĕ
ੁਠ
ō
%
8
ó,
eater
é
ō
the
ices t
2
alanc
рa
Ħ
ž
accol
ŏ
끞
`₹
S
5
de de
$\stackrel{\circ}{=}$
a
ŝţ
<u>=</u>
€
idua
ģ
<u>-</u>

A Company of A		П	20 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	200	(L	Ĺ	
Name of Debior		-30 Days	31-60 Days	61-90 Days	3	Over 90 Days	Non Admitted		Admitted
Total Individuals		0	0		0	0	0		0
Group subscribers:									
FEDERAL EMPLOYEES	S	1,125,389.67	1,125,389.67 \$ 1,002,493.51 \$	·	s	1	\$	ક	\$ 2,127,883.18
NATIONWIDE INSURANCE CO.	ઝ	\$ 90.852,288	\$ 4,831.26	\$ 1,597.64	\$	1	\$	s	813,966.96
CITIGROUP, INC CITIBANK	\$	517,889.75 \$	\$ 83,256.33	ج	s,	'	5	ક્ક	601,146.08
								_	
								L	
								_	
	_							L	
Group subscriber subtotal	S	2,450,817.48	2,450,817.48 \$ 1,090,581.10 \$	\$ 1,597.64	s	-		S	3,542,996.22
Premiums due and unpaid not individually listed	s	5,585,392.72 \$	\$ 936,397.60	\$ 41,532.38 \$		359,406.50 \$	\$ 359,406.50 \$	S	6,563,322.70
Total group	€>	8,036,210.20	8,036,210.20 \$ 2,026,978.70	\$ 43,130.02	s	359,406.50	\$ 359,406.50	ક્ક	359,406.50 \$ 10,106,318.92
Premiums due and unpaid from Medicare entities	\$	(320,275.83)	- \$	ج	S		· •	S	(320,275.83)
Premiums due and unpaid from Medicaid entities	\$	-	- \$	· ج	\$	184,294.29	٠.	S	184,294.29
Accident and health premiums due and unpaid (Page 2, Line 13.1)	\$	7,715,934.37	2, Line 13.1) \$ 7,715,934.37 \$ 2,026,978.70 \$	\$ 43,130.02 \$		543,700.79 \$	359,406.50	S	9,970,337.38

STATEMENT AS OF SEPTEMBER 30, 2005 OF JOHN DEERE HEALTH PLAN, INC.

EXHIBIT 3 - HEALTH CARE RECEIVABLES

255.976		
7,707 7,707		
30.4919 0 0 0 0 0 0 7707 7707 0 0 0 0 0		
504,004 100,745 110		

STATEMENT AS OF SEPTEMBER 30, 2003 OF JOHN DEERE HEALTH PLAN, INC.

EXHIBIT 5 - AMOUNTS DUE FROM PARENT, SUBSIDIARIES AND AFFILIATES

Name of Debtor 1 - 20 Days, 21 - 50 Days, 21 - 50 Days, 21 - 50 Days, 21 - 50 Days, 21 - 51 Days, 21	0	151,129	151,129					0399999 TOTAL GROSS AMOUNTS RECEIVABLE
Name of Debtoor 1 1-20 Days 1 1-20 Days 2	٥		0					99999 RECEIVABLES NOT INDIVIDUALLY LISTED
Name of Debtor 1 - 2 3	. 0	151,129	151,129	0	0	0	151,129	0198999 INDIVIDUALLY LISTED RECEIVABLES
Name of Debtor 1 - 20 Days 51 - 90 Days 51								
Name of Debtor 1 - 20 Days 31 - 80 Days S1 - 90 Days S1								
Name of Oction	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
Name of Debtor 1 2 3 4 5 6 Admits Current Non-Admitted Current Non-Admitted Current Non-Admitted Current Non-Admitted Current Non-Admitted								
Name of Delator 1 - 20 Days 1 - 50 Days 1 - 51 - 125 1 - 51								
1								
Name of Debtor 1.30 Days 51.90 Days 61.90 Days Over 96 Days Non-Admitted Current Non-Admitted Current Non-Admitted Fig. 151.129 151.12								
Name of Debtor 1 2 3 4 5 6 Acmeter 1 2 3 4 5 6 Acmeter 1 2 5 5 6 Current 1 2 5 5 6 Current 1 2 5 5 6 6 Current 1 2 5 6 C								
Name of Debtor 1.30 Days 1.30 Days 151,729 151,729 151,729 151,729 151,729 151,729 151,729								
Name of Debtor 1 - 30 Days 31 - 90 Days 61 - 90 Days Ove 90 Days Non-Admitted Current Non-C								
Name of Debtor 1.30 Days 31-60 Days 61-90 Days Over 90 Days Non-Admitted Current Non-C								
Name of Detrior 1 - 30 Days 31 - 60 Days 32 - Corr 90 Days 33 - Corr 90 Days 34 - Corr 90 Days 35 - Corr 90 Days 36 - Corr 90 Days 37 - Corr 90 Days 37 - Corr 90 Days 38 - Corr 90 Days 38 - Corr 90 Days 39 - Corr 90 Days 30 - Corr 90 Days 30 - Corr 90 Days 31 - 60 Days 31 - 60 Days 31 - 60 Days 31 - 60 Days 32 - Corr 90 Days 33 - Corr 90 Days 34 - Corr 90 Days 35 - Corr 90 Days 36 - Corr 90 Days 37 - Corr 90 Days 37 - Corr 90 Days 38 - Corr 90 Days 38 - Corr 90 Days 39 - Corr 90 Days 30 - Corr 90 Days 30 - Corr 90 Days 30 - Corr 90 Days 31 - 60 Days 31 - 60 Days 31 - 60 Days 31 - 60 Days 32 - Corr 90 Days 33 - Corr 90 Days 34 - Corr 90 Days 35 - Corr 90 Days 36 - Corr 90 Days 37 - Corr 90 Days 37 - Corr 90 Days 38 - Corr 90 Days 39 - Corr 90 Days 30 - Corr 90 Days 30 - Corr 90 Days 30 - Corr 90 Days 31 - Corr 90 Days 32 - Corr 90 Days 33 - Corr 90 Days 34 - Corr 90 Days 35 - Corr 90 Days 36 - Corr 90 Days 37 - Corr 90 Days 37 - Corr 90 Days 38 - Corr 90 Days 38 - Cor								
Name of Debtor 1 - 30 Days 31 - 60 Days 31 - 60 Days 31 - 60 Days 151,729 151,729 151,729					-			
Name of Debtor 1 - 30 Days 31 - 80 Days 61 - 90 Days Over 90 Days Over 90 Days Over 90 Days 151.729 751.729 751.729								
Name of Detror 1 2 3 4 5 6 Admitted 1 - 30 Days 31 - 60 Days 61 - 90 Days Over 90 Days Over 90 Days Over 90 Days 151,1729 751,1729 1 - 30 Tay								
Name of Detror 1 . 30 Days 31 . 60 Days 51 . 90 Days Over 90 Days Non-Admitted Current 151.129 151.129 151.129								
Name of Debtor 1 . 30 Days 31 . 60 Days 61 . 90 Days Over 90 Days Non-Admitted Curent 151.129 151.129 151.129								
Name of Detror 1 .2 .3 .4 .5 .60 Admitted 1 .30 Days 31 .60 Days 61 .90 Days Over 90 Days Mon-Admitted Current 151.129 .151.129								
Name of Debtor 1 2 3 4 5 Admited 1 - 30 Days								
Name of Debtor 1 . 30 Days 31 . 60 Days 61 . 90 Days Over 90 Days Non-Admitted Current 151.129 151.129 151.129								
Name of Debtor 1 2 3 4 5 Admitted 1 - 30 Days 51 - 60 Days 61 - 90 Days Over 90 Days Non-Admitted Current 151,129 151,129 151,129 151,129								
Name of Debtor 1 2 3 4 5 6 Admited 1 - 30 Days 31 - 60 Days 61 - 90 Days Over 90 Days Non-Admitted Current 151,129 151,129 151,129								
Name of Debtor 1 - 30 Days 31 - 60 Days 51 - 60 Days 61 - 90 Days Over 90 Days Non-Admitted Current 151,129 151,129 151,129							***************************************	
Name of Debtor 1 2 3 4 5 Admitted 1 - 30 Days 31 - 60 Days 61 - 90 Days Over 90 Days Non-Admitted Current 151 (29) 151 (29) 151 (29)								
Name of Detror 1 - 30 Days 31 - 60 Days 51 - 60 Days 61 - 90 Days Over 90 Days Non-Admitted Current 151,129 151,129 151,129								
Name of Debtor 1 2 3 4 5 Admitted 1 - 30 Days 31 - 80 Days 61 - 90 Days Over 90 Days Non-Admitted Curent 151,129 151,129	***************************************							
Name of Debtor 1 - 30 Days 31 - 60 Days 61 - 90 Days Over 90 Days Non-Admitted Current 151,129 151,129 151,129								
Name of Debtor 1 2 3 4 5 Admitted 1 - 30 Days 31 - 80 Days 61 - 90 Days Over 90 Days Non-Admitted Current 151,128 151,129 151,129								
Name of Debtor 1 - 30 Days 31 - 80 Days 61 - 90 Days Over 90 Days Non-Admitted Current 51,729 151,729 151,729								
Name of Debtor 1 - 30 Days 31 - 60 Days 61 - 90 Days Over 90 Days Non-Admitted Current 151,129 151,129								
Name of Debtor 1 2 3 4 5 Admitted 1 - 30 Days 31 - 60 Days 61 - 90 Days Over 90 Days Non-Admitted Current		131,123	671,101				151,129	John Deere Health Care, Inc.
Name of Debtor 1 2 3 4 5 Admitted 1 - 30 Days 31 - 60 Days 61 - 90 Days Over 90 Days Non-Admitted Current		424 435	XXX YXX				A.T. C.	
1 - 30 Days 31 - 60 Days 61 - 90 Days Over 90 Days Non-Admitted Current								AMOUNTS DUE FROM AFFILIATES
1 2 3 4 5 Admitted 6 6 1 - 30 Days 31 - 60 Days 61 - 90 Days Over 90 Days Non-Admitted Current								
2 3 4 5 Admitted 6	Non-Current	Current	Non-Admitted	Over 90 Days	61 - 90 Days	31 - 60 Days	1 - 30 Days	Name of Debtor
5	- 1	6				,		
		Admitted	5	4	3	3	•	Application of the state of the

STANDARD CENTER OF THE CENTER